

**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

**REQUEST FOR PATENT FEE REFUND**

<b>1 Date of Request:</b> <u>7-22-05</u>		<b>2 Serial/Patent #</b> <u>10/519441</u>	
<b>3 Please refund the following fee(s):</b>	<b>4 PAPER NUMBER</b>	<b>5 DATE FILED</b>	<b>6 AMOUNT</b>
<input checked="" type="checkbox"/> Filing	<u>1</u>	<u>12/29/04</u>	\$ <u>100</u>
<input type="checkbox"/> Amendment			\$
<input type="checkbox"/> Extension of Time			\$
<input type="checkbox"/> Notice of Appeal/Appeal			\$
<input type="checkbox"/> Petition			\$
<input type="checkbox"/> Issue			\$
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$
<input type="checkbox"/> Maintenance			\$
<input type="checkbox"/> Assignment			\$
<input type="checkbox"/> Other			\$
		<b>7 TOTAL AMOUNT OF REFUND</b>	
		\$ <u>100</u>	
		<b>8 TO BE REFUNDED BY:</b>	
<b>10 REASON:</b>		<input type="checkbox"/> Treasury Check	
		<input checked="" type="checkbox"/> Credit Deposit A/C #:	
		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>9</b>    <u>1</u> <u>3</u> <u>--</u> <u>0</u> <u>0</u> <u>1</u> <u>0</u> </div>	
<input type="checkbox"/> Duplicate Payment			
<input type="checkbox"/> No Fee Due (Explanation):			
<b>11 REFUND REQUESTED BY:</b>			
TYPED/PRINTED NAME: <u>A JOHNSON</u>		TITLE: <u>paralegal</u>	
SIGNATURE: <u>[Signature]</u>		PHONE: <u>308-9740</u>	
OFFICE: <u>PCT</u>			
*****			
THIS SPACE RESERVED FOR FINANCE USE ONLY:			
APPROVED: _____		DATE: _____	

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*